

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

Chapter you are filing under:

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Kristin

First name

M.

Middle name

Swigon

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Kristin M. Small

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-9498

Debtor 1 **Kristin M. Swigon**

Case number (if known)

About Debtor 1:**About Debtor 2 (Spouse Only in a Joint Case):****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**☒ I have not used any business name or EINs.☐ I have not used any business name or EINs.Include trade names and
doing business as names

Business name(s)

Business name(s)

EINs

EINs

5. Where you live**430 S. Thurlow St.
Hinsdale, IL 60521**

Number, Street, City, State & ZIP Code

DuPage

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.**464 Wexford Rd.
Valparaiso, IN 46385**

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Kristin M. Swigon

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Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13
- Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No.
☐ Yes.
- | | |
|-----------------------------|---------------------------|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
11. **Do you rent your residence?** ☒ No. Go to line 12.
☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No.☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Kristin M. Swigon**

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Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

| | | |
|-------------------------------------|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 16. What kind of debts do you have? | 16a. | Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17. |
| | 16b. | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17. |
| | 16c. | State the type of debts you owe that are not consumer debts or business debts |

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17. Are you filing under Chapter 7? | <input type="checkbox"/> No. | I am not filing under Chapter 7. Go to line 18. |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | <input checked="" type="checkbox"/> Yes. | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

| | | | |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| 18. How many Creditors do you estimate that you owe? | <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000 |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|

| | | | |
|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 19. How much do you estimate your assets to be worth? | <input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | | |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 20. How much do you estimate your liabilities to be? | <input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Kristin M. Swigon**Kristin M. Swigon**

Signature of Debtor 1

Signature of Debtor 2

Executed on **April 14, 2017**

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1 **Kristin M. Swigon**

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David P. Lloyd

Signature of Attorney for Debtor

Date

April 14, 2017

MM / DD / YYYY

David P. Lloyd

Printed name

David P. Lloyd, Ltd.

Firm name

615B S. LaGrange Rd.

La Grange, IL 60525

Number, Street, City, State & ZIP Code

Contact phone **708-937-1264**

Email address

info@davidlloydllaw.com

6183542

Bar number & State

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

| | | Your assets Value of what you own |
|-------------------------------------------------------------------|----|--------------------------------------|
| 1. Schedule A/B: Property (Official Form 106A/B) | | |
| 1a. Copy line 55, Total real estate, from Schedule A/B..... | \$ | 0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B..... | \$ | 8,030.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B..... | \$ | 8,030.00 |

Part 2: Summarize Your Liabilities

| | | Your liabilities Amount you owe |
|---------------------------------------------------------------------------------------------------------------------------------------|----|------------------------------------|
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | | |
| 2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ... | \$ | 0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | | |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$ | 413.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | \$ | 866,333.73 |
| Your total liabilities | | \$ 866,746.73 |

Part 3: Summarize Your Income and Expenses

| | | |
|---------------------------------------------------------------------------|----|----------|
| 4. Schedule I: Your Income (Official Form 106I) | | |
| Copy your combined monthly income from line 12 of <i>Schedule I</i> | \$ | 3,850.00 |
| 5. Schedule J: Your Expenses (Official Form 106J) | | |
| Copy your monthly expenses from line 22c of <i>Schedule J</i> | \$ | 3,844.00 |

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

7. What kind of debt do you have?

☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 **Kristin M. Swigon**

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Case number (if known)

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **3,000.00**

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

From Part 4 on *Schedule E/F*, copy the following:**Total claim**

| | |
|------------------------------------------------------------------------------------------------------------------------------|---------------------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ 413.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ 38,331.85 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ 0.00 |

9g. **Total.** Add lines 9a through 9f.

\$ **38,744.85**

Fill in this information to identify your case and this filing:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number | | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
- ☐ Yes. Where is the property?

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☒ No
- ☐ Yes

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
- ☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$0.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
- ☒ Yes. Describe.....

Miscellaneous items**\$1,500.00**7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
- ☒ Yes. Describe.....

Debtor 1

Kristin M. Swigon

Document

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Case number (if known)

Miscellaneous items such as TV, computer, etc.\$750.00**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.....Various items of clothes, shoes, accessories, etc.\$350.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....Miscellaneous items of costume jewelry\$400.00**13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe.....Two dogsUnknown**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**\$3,000.00**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes.....

Debtor 1

Kristin M. Swigon

Document

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Case number (if known)

Cash**\$30.00****17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes.....

Institution name:

17.1. **Checking**Bank of America\$2,000.0017.2. **Savings**Bank of America\$3,000.00**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Creative Foods, LLC d/b/a Scapa Italian Kitchen60%

%

\$0.00**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☒ No☐ Yes. Give specific information about them...

Debtor 1 **Kristin M. Swigon**

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Case number (if known)

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information.....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information..**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☒ No☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.....**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information..**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....****\$5,030.00****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

Debtor 1 Kristin M. Swigon

Case number (if known) _____

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
- ☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
- ☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
- ☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00**Part 8: List the Totals of Each Part of this Form**

| | | |
|------------------------------------------------------------------|-------------------|------------------------------------------------|
| 55. Part 1: Total real estate, line 2 | | \$0.00 |
| 56. Part 2: Total vehicles, line 5 | \$0.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$3,000.00 | |
| 58. Part 4: Total financial assets, line 36 | \$5,030.00 | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$0.00 | |
| | + | |
| 62. Total personal property. Add lines 56 through 61... | \$8,030.00 | Copy personal property total \$8,030.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$8,030.00 |

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small> | Amount of the exemption you claim <small>Check only one box for each exemption.</small> | Specific laws that allow exemption |
|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Miscellaneous items Line from <i>Schedule A/B</i> : 6.1 | \$1,500.00 | <input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Miscellaneous items such as TV, computer, etc. Line from <i>Schedule A/B</i> : 7.1 | \$750.00 | <input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Various items of clothes, shoes, accessories, etc. Line from <i>Schedule A/B</i> : 11.1 | \$350.00 | <input checked="" type="checkbox"/> \$350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |
| Miscellaneous items of costume jewelry Line from <i>Schedule A/B</i> : 12.1 | \$400.00 | <input checked="" type="checkbox"/> \$400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Two dogs Line from <i>Schedule A/B</i> : 13.1 | Unknown | <input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |

Debtor 1 **Kristin M. Swigon**

Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Cash Line from Schedule A/B: 16.1 | \$30.00 | <input checked="" type="checkbox"/> \$30.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Checking: Bank of America Line from Schedule A/B: 17.1 | \$2,000.00 | <input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Savings: Bank of America Line from Schedule A/B: 17.2 | \$3,000.00 | <input checked="" type="checkbox"/> \$1,300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Creative Foods, LLC d/b/a Scapa Italian Kitchen 60% Line from Schedule A/B: 19.1 | \$0.00 | <input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?☐ No☐ Yes

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number | | | |
| (if known) | | | |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☒ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing
Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**
☐ No. Go to Part 2.

☒ Yes.
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | | Total claim | Priority amount | Nonpriority amount |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------|--------------------|
| 2.1 | Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code | Last 4 digits of account number | \$413.00 | Unknown |
| | | When was the debt incurred? | 2014 | Unknown |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ | | | | |
| Taxes owed and other charges | | | | |

Debtor 1 **Kristin M. Swigon**

Case number (if know)

| | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|-------------------------|
| 2.2 | Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code | Last 4 digits of account number _____ When was the debt incurred? _____ | _____ Unknown | _____ Unknown | _____ Unknown |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ pay roll taxes Creative Foods, LLC d/b/a Scapa Italian Kitchen | | | |

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

| | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--|--|
| 4.1 | A+ Hood Cleaning Nonpriority Creditor's Name 554 Anderson Dr., Ste. D Romeoville, IL 60446 Number Street City State Zip Code | Last 4 digits of account number _____ When was the debt incurred? _____ | Total claim \$1,000.00 | | |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify open account | | | |

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.2

Advanced Disposal

Nonpriority Creditor's Name

PO Box 6484**Carol Stream, IL 60197**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **7715****\$2,000.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

4.3

AlSCO Linens

Nonpriority Creditor's Name

2641 S. Leavitt Street**Chicago, IL 60608**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **1120****\$1,200.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

4.4

American Education Services - AES

Nonpriority Creditor's Name

Loan Service Division**P.O. Box 2461****Harrisburg, PA 17105-2461**

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **7430****\$9,421.41****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify**student loan**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.5

American Education Services - AES

Nonpriority Creditor's Name

Loan Service Division**P.O. Box 2461****Harrisburg, PA 17105-2461**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **7430****\$9,478.10****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify _____

student loan

4.6

American Education Services - AES

Nonpriority Creditor's Name

Loan Service Division**P.O. Box 2461****Harrisburg, PA 17105-2461**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **7430****\$19,432.34****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify _____

student loan

4.7

Amita Health

Nonpriority Creditor's Name

Adventist Hinsdale Hospital**75 Remittance Dr., Ste. 3250****Chicago, IL 60675**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **2575****\$708.84****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **medical services**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.8

AmTrust North America

Nonpriority Creditor's Name

**59 Maiden Lane, 43rd Floor
New York, NY 10038**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **8814****\$851.25****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

4.9

Angelo Gelato

Nonpriority Creditor's Name

**1041 Waveland Ave.
Franklin Park, IL 60131**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

\$600.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.1
0**Automatic Icemakers**

Nonpriority Creditor's Name

**3725 N. Talman Ave.
Chicago, IL 60618**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

\$330.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.1
1**Banana Republic Visa/Synchrony**

Nonpriority Creditor's Name

PO Box 960017**Orlando, FL 32896-0017**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **0508****\$7,114.02****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.1
2**Bank of America Visa**

Nonpriority Creditor's Name

PO Box 851001**Dallas, TX 75285-1001**

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **6247****\$7,449.69****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.1
3**BOA Merchnat Services**

Nonpriority Creditor's Name

150 N. College Ave.**Charlotte, NC 28202**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **2882****\$551.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.1
4**Byline Bank**

Nonpriority Creditor's Name

**10 N. Martingale Rd., Ste. 160
Schaumburg, IL 60173**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **6444****\$287,191.58****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Money loaned**4.1
5**Capital One Bank USA, NA - Visa**

Nonpriority Creditor's Name

PO Box 30285**Salt Lake City, UT 84130-0287**

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **8837****\$4,398.31****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.1
6**Chase Bank Visa**

Nonpriority Creditor's Name

PO Box 94014**Palatine, IL 60094-4014**

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **5132****\$9,489.08****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

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Case number (if know)

4.1
7**Chase Ink Visa**Last 4 digits of account number **2165****\$13,302.83**

Nonpriority Creditor's Name

PO Box 1423**Charlotte, NC 28201-1423**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.1
8**Comcast**Last 4 digits of account number **4380****\$1,327.80**

Nonpriority Creditor's Name

2001 York Rd.**Oak Brook, IL 60523**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.1
9**ComEd**Last 4 digits of account number **6078****\$26,000.00**

Nonpriority Creditor's Name

10 S. Dearborn St.**Chicago, IL 60603**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**4.2
0**Constellation New Energy**Last 4 digits of account number **1536****\$10,000.00**

Nonpriority Creditor's Name

**c/o Teller, Levit & Silvertrust PC
419 S. LaSalle St., Ste. 701
Chicago, IL 60603**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.2
1**Cosmopolitan Linen**

Last 4 digits of account number

Unknown

Nonpriority Creditor's Name

**4508 W. 46th St.
Chicago, IL 60632**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.2
2**Deluxe**Last 4 digits of account number **7556****\$96.17**

Nonpriority Creditor's Name

**PO Box 742572
Cincinnati, OH 45274-2572**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

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Case number (if know)

4.2
3**EcoLab**

Nonpriority Creditor's Name

**370 N. Wabasha St.
Saint Paul, MN 55102-2233**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **2675****\$1,200.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.2
4**Edward Don**

Nonpriority Creditor's Name

**c/o Lichtman Eisen Partners, Ltd.
222 N. LaSalle St., Ste. 300
Chicago, IL 60601**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **0466****\$3,828.72****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.2
5**Elisha Properties, LLC**

Nonpriority Creditor's Name

**10151 Corporate Sq. Dr., Ste. 100
Saint Louis, MO 63132**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **29****Unknown****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **business debt**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.2
6**First Nat'l Bank of Brookfield**Last 4 digits of account number **7901****\$46,793.35**

Nonpriority Creditor's Name

**c/o Robert Dawidiuk, Collins Law
1770 N. Park St., Ste. 200
Naperville, IL 60563**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **money loaned**4.2
7**Fortune Fish & Gourmet Foods**

Last 4 digits of account number

\$1,200.00

Nonpriority Creditor's Name

**1068 Thorndale Ave.
Bensenville, IL 60106**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.2
8**Get Fresh Produce**

Last 4 digits of account number

\$13,000.00

Nonpriority Creditor's Name

**c/o Richard T. Avis & Assoc., LLC
PO Box 31579
Chicago, IL 60631**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

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Case number (if know)

4.2
9**Gordon Food Service**

Nonpriority Creditor's Name

NACM Comm Claims Div.**PO Box 547800****Orlando, FL 32854-7800**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **8913****\$3,500.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.3
0**Groupon**

Nonpriority Creditor's Name

600 W. Chicago Ave.**Chicago, IL 60654**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.3
1**IDES**

Nonpriority Creditor's Name

2444 W. Lawrence Ave.**Chicago, IL 60625**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account
Creative Foods LLC d/b/a Scapa Italian
Kitchen**

Debtor 1 **Kristin M. Swigon**4.3
2**Illinois Casualty Company**

Nonpriority Creditor's Name

PO Box 5018**Rock Island, IL 61204**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **4522****\$1,034.58**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.3
3**Illinois Emergency Medicine**

Nonpriority Creditor's Name

Specialists, LLC.**PO Box 71402****Chicago, IL 60694**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **5862****\$167.51**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **medical services**4.3
4**Internal Revenue Service**

Nonpriority Creditor's Name

Centralized Insolvency Operations**P.O. Box 7346****Philadelphia, PA 19101-7346**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

\$413.00When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Taxes owed and other charges**

Debtor 1 **Kristin M. Swigon**4.3
5**Macy's Amex**

Nonpriority Creditor's Name

PO Box 9001108**Louisville, KY 40290-1108**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **8744****\$3,683.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **open account**

4.3
6**Maestranzi Brothers Knife Co.**

Nonpriority Creditor's Name

4715 N. Ronald St.**Harwood Heights, IL 60706**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **SCAPA****\$616.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **open account**

4.3
7**Michael & Yvonne Sperandeo**

Nonpriority Creditor's Name

c/o William Shapiro, Attorney**452 N. Carlisle Ct.****Round Lake, IL 60073**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number

\$44,793.97**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **money loaned**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.3
8**Nicor Gas**

Nonpriority Creditor's Name

PO Box 5407**Carol Stream, IL 60197**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **2840****\$166.68****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Open account**4.3
9**Nicor Gas**

Nonpriority Creditor's Name

PO Box 2020**Aurora, IL 60507-2020**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **6705****\$1,282.89****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **open account**4.4
0**Nordstrom Visa**

Nonpriority Creditor's Name

PO Box 79137**Phoenix, AZ 85062-9137**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **7216****\$7,652.36****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**4.4
1**Northwest Meat Company**

Nonpriority Creditor's Name

**440 N. Morgan Street
Chicago, IL 60642**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

\$1,500.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.4
2**NuCo2**

Nonpriority Creditor's Name

**PO Box 9011
Stuart, FL 34995**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

9367**\$1,300.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.4
3**Open Table**

Nonpriority Creditor's Name

**954 W. Washington Blvd., Ste. 320
Chicago, IL 60607**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

7135**\$2,158.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

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Case number (if know)

4.4
4**Orkin Pest Control**

Nonpriority Creditor's Name

603 E. Diehl Rd.**IL 60569**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **0312****\$398.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.4
5**Republic Services #551**

Nonpriority Creditor's Name

PO Box 9001154**Louisville, KY 40290-1154**

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **1808****\$96.99****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Open account**4.4
6**Ria Financial Services**

Nonpriority Creditor's Name

400 S. Broadway**Los Angeles, CA 90013**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number **2675****\$1,950.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

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Case number (if know)

4.4
7**Roins RFD Produce**

Nonpriority Creditor's Name

**2300 W. Lake Street
Chicago, IL 60612**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

\$8,000.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.4
8**Ronald W. Goers, DDS, PC**

Nonpriority Creditor's Name

**6700 Route 83
Darien, IL 60561**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

0033**\$2,700.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.4
9**SaveOn**

Nonpriority Creditor's Name

**100 W. Maple
Troy, MI 48084**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

8259**\$1,390.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.5
0**Smithereen Pest Management**

Nonpriority Creditor's Name

**7400 N. Melvina
Niles, IL 60714**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **6329****\$700.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.5
1**SPS Partners, LLC**

Nonpriority Creditor's Name

**c/o William T. Dwyer, Jr., Attorney
10 S. LaSalle Street., Ste. 3700
Chicago, IL 60603**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **0339****\$156,186.96**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **money loaned**4.5
2**Target Red Card**

Nonpriority Creditor's Name

**PO Box 660170
Dallas, TX 75266-0170**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **8849****\$1,584.70**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**

Case number (if know)

4.5
3**The Business Backer, LLC**

Nonpriority Creditor's Name

**c/o Scott Liberman, One Dayton
Centr
One South Main St., Ste. 1700
Dayton, OH 45402**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **0821****\$131,650.64****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **open account**

4.5
4**Tri-Mark Marlin**

Nonpriority Creditor's Name

**c/o Credit Recovery Services
212 W. St. Charles Rd.
Villa Park, IL 60181**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **1451;3172****\$6,154.76****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **Open account**

4.5
5**Turano Baking Co**

Nonpriority Creditor's Name

**c/o Attorney Richard T. Avis
PO Box 31579
Hinsdale, IL 60521-3930**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number **9681;8310****\$3,518.20****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- ☒ Contingent
- ☒ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**4.5
6**Village of Clarendon Hills**

Nonpriority Creditor's Name

**1 N. Prospect
Clarendon Hills, IL 60514**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

Unknown**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.5
7**West Suburban Currency Exchanges**

Nonpriority Creditor's Name

**2140 S. Wolf Rd., Ste. A
Des Plaines, IL 60018**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

\$1,850.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.5
8**Westmont Currency Exchange**

Nonpriority Creditor's Name

**6230 S. Cass Ave.
IL 60590**

Number Street City State Zip Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number

\$600.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**

Debtor 1 **Kristin M. Swigon**Document Page 39 of 83
Case number (if know)4.5
9**Willowbrook Currency Exchange**

Nonpriority Creditor's Name

**217 S. Kingery Hwy
Willowbrook, IL 60527**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

\$1,600.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account**4.6
0**Wirtz Beverage**

Nonpriority Creditor's Name

**c/o Mark E. Abrams, Abrams &
Abrams****180 W. Washington St., Ste. 910
Chicago, IL 60602**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

1417**\$1,721.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **open account****Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | Total Claim |
|--------------------------|-----------------------------------------------------------------------------|-----|------------------|
| | | \$ | 0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | Total Claim |
| | | \$ | 413.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | Total Claim |
| Total claims from Part 2 | | \$ | 0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | Total Claim |
| | | \$ | 0.00 |
| | 6e. Total Priority. Add lines 6a through 6d. | 6e. | Total Claim |
| | | \$ | 413.00 |
| | 6f. Student loans | 6f. | Total Claim |
| | | \$ | 38,331.85 |
| | 6g. Obligations arising out of a separation agreement or divorce that | 6g. | Total Claim |
| | | \$ | 0.00 |

Debtor 1 **Kristin M. Swigon**

Case number (if know) _____

you did not report as priority claims

6h. **Debts to pension or profit-sharing plans, and other similar debts**

6h. \$ **0.00**

6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ **828,001.88**

6j. **Total Nonpriority.** Add lines 6f through 6i.

6j. \$ **866,333.73**

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**
☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | | State what the contract or lease is for |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| 2.1 | Acura Financial c/o American Honda Finance 2170 Point Blvd., Ste. 100 Elgin, IL 60123-6632 | Auto lease for Acura MDX 2015 through 10/17 for \$562/mo #18814xxx |

Fill in this information to identify your case:

| | | | |
|------------------------------------------------------------------------------|--------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | |
| Case number _____ (if known) | | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.

☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes.

In which community state or territory did you live? **-NONE-** . Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent
Number, Street, City, State & Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 **Anthony Swigon**

☐ Schedule D, line _____

☒ Schedule E/F, line **2.1**
☐ Schedule G _____

Internal Revenue Service

3.2 **Anthony Swigon**

☐ Schedule D, line _____

☒ Schedule E/F, line **4.14**
☐ Schedule G _____

Byline Bank

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: **The creditor to whom you owe the debt**
Check all schedules that apply:

3.3 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.25**
☐ Schedule G _____
Elisha Properties, LLC

3.4 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.26**
☐ Schedule G _____
First Nat'l Bank of Brookfield

3.5 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.37**
☐ Schedule G _____
Michael & Yvonne Sperandeo

3.6 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.51**
☐ Schedule G _____
SPS Partners, LLC

3.7 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **2.2**
☐ Schedule G _____
Internal Revenue Service

3.8 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.1**
☐ Schedule G _____
A+ Hood Cleaning

3.9 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.2**
☐ Schedule G _____
Advanced Disposal

3.10 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.3**
☐ Schedule G _____
Alisco Linens

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.11 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.9**
☐ Schedule G _____
Angelo Gelato

3.12 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.10**
☐ Schedule G _____
Automatic Icemakers

3.13 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.13**
☐ Schedule G _____
BOA Merchnat Services

3.14 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.8**
☐ Schedule G _____
AmTrust North America

3.15 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.17**
☐ Schedule G _____
Chase Ink Visa

3.16 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.18**
☐ Schedule G _____
Comcast

3.17 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.19**
☐ Schedule G _____
ComEd

3.18 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.20**
☐ Schedule G _____
Constellation New Energy

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.19 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.21**
☐ Schedule G _____
Cosmopolitan Linen

3.20 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.22**
☐ Schedule G _____
Deluxe

3.21 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.23**
☐ Schedule G _____
EcoLab

3.22 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.24**
☐ Schedule G _____
Edward Don

3.23 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.27**
☐ Schedule G _____
Fortune Fish & Gourmet Foods

3.24 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.28**
☐ Schedule G _____
Get Fresh Produce

3.25 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.29**
☐ Schedule G _____
Gordon Food Service

3.26 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.30**
☐ Schedule G _____
Groupon

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.27 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.31**
☐ Schedule G _____
IDES

3.28 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.32**
☐ Schedule G _____
Illinois Casualty Company

3.29 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.36**
☐ Schedule G _____
Maestranzi Brothers Knife Co.

3.30 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.48**
☐ Schedule G _____
Ronald W. Goers, DDS, PC

3.31 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.39**
☐ Schedule G _____
Nicor Gas

3.32 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.41**
☐ Schedule G _____
Northwest Meat Company

3.33 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.42**
☐ Schedule G _____
NuCo2

3.34 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.43**
☐ Schedule G _____
Open Table

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.35 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.46**
☐ Schedule G _____
Ria Financial Services

3.36 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.47**
☐ Schedule G _____
Roins RFD Produce

3.37 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.50**
☐ Schedule G _____
Smithereen Pest Management

3.38 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.54**
☐ Schedule G _____
Tri-Mark Marlin

3.39 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.56**
☐ Schedule G _____
Village of Clarendon Hills

3.40 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.57**
☐ Schedule G _____
West Suburban Currency Exchanges

3.41 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.58**
☐ Schedule G _____
Westmont Currency Exchange

3.42 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.59**
☐ Schedule G _____
Willowbrook Currency Exchange

Debtor 1 **Kristin M. Swigon**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.43 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.53**
☐ Schedule G _____
The Business Backer, LLC

3.44 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.11**
☐ Schedule G _____
Banana Republic Visa/Synchrony

3.45 **Anthony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.40**
☐ Schedule G _____
Nordstrom Visa

3.46 **Atnhony Swigon**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.44**
☐ Schedule G _____
Orkin Pest Control

3.47 **Creative Foods LLC**
dba Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.25**
☐ Schedule G _____
Elisha Properties, LLC

3.48 **Creative Foods LLC**
dba Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.26**
☐ Schedule G _____
First Nat'l Bank of Brookfield

3.49 **Creative Foods LLC**
dba Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.37**
☐ Schedule G _____
Michael & Yvonne Sperandeo

3.50 **Creative Foods LLC**
dba Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.51**
☐ Schedule G _____
SPS Partners, LLC

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: **The creditor to whom you owe the debt**
Check all schedules that apply:

3.51 **Creative Foods LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.54**
☐ Schedule G _____
Tri-Mark Marlin

3.52 **Creative Foods LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.55**
☐ Schedule G _____
Turano Baking Co

3.53 **Creative Foods, LLC**
dba Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **2.1**
☐ Schedule G _____
Internal Revenue Service

3.54 **Creative Foods, LLC**
dba Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.14**
☐ Schedule G _____
Byline Bank

3.55 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **2.2**
☐ Schedule G _____
Internal Revenue Service

3.56 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.24**
☐ Schedule G _____
Edward Don

3.57 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.1**
☐ Schedule G _____
A+ Hood Cleaning

3.58 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.2**
☐ Schedule G _____
Advanced Disposal

Debtor 1 **Kristin M. Swigon**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.59 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.3**
☐ Schedule G _____
AlSCO Linens

3.60 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.9**
☐ Schedule G _____
Angelo Gelato

3.61 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.10**
☐ Schedule G _____
Automatic Icemakers

3.62 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.13**
☐ Schedule G _____
BOA Merchnat Services

3.63 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.8**
☐ Schedule G _____
AmTrust North America

3.64 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.17**
☐ Schedule G _____
Chase Ink Visa

3.65 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.18**
☐ Schedule G _____
Comcast

3.66 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.19**
☐ Schedule G _____
ComEd

Debtor 1 **Kristin M. Swigon**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.67 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.20**
☐ Schedule G _____
Constellation New Energy

3.68 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.21**
☐ Schedule G _____
Cosmopolitan Linen

3.69 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.22**
☐ Schedule G _____
Deluxe

3.70 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.23**
☐ Schedule G _____
EcoLab

3.71 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.27**
☐ Schedule G _____
Fortune Fish & Gourmet Foods

3.72 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.28**
☐ Schedule G _____
Get Fresh Produce

3.73 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.29**
☐ Schedule G _____
Gordon Food Service

3.74 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.30**
☐ Schedule G _____
Groupon

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: **The creditor to whom you owe the debt**
Check all schedules that apply:

3.75 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.31**
☐ Schedule G _____
IDES

3.76 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.32**
☐ Schedule G _____
Illinois Casualty Company

3.77 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.36**
☐ Schedule G _____
Maestranzi Brothers Knife Co.

3.78 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.39**
☐ Schedule G _____
Nicor Gas

3.79 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.41**
☐ Schedule G _____
Northwest Meat Company

3.80 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.42**
☐ Schedule G _____
NuCo2

3.81 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.43**
☐ Schedule G _____
Open Table

3.82 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.44**
☐ Schedule G _____
Orkin Pest Control

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.83 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.46**
☐ Schedule G _____
Ria Financial Services

3.84 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.47**
☐ Schedule G _____
Roins RFD Produce

3.85 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.49**
☐ Schedule G _____
SaveOn

3.86 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.50**
☐ Schedule G _____
Smithereen Pest Management

3.87 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.56**
☐ Schedule G _____
Village of Clarendon Hills

3.88 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.57**
☐ Schedule G _____
West Suburban Currency Exchanges

3.89 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.58**
☐ Schedule G _____
Westmont Currency Exchange

3.90 **Creative Foods, LLC**
d/b/a Scapa Italian Kitchen

☐ Schedule D, line _____
☒ Schedule E/F, line **4.59**
☐ Schedule G _____
Willowbrook Currency Exchange

Debtor 1 **Kristin M. Swigon**

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.91 **Creative Foods, LLC**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.53**
☐ Schedule G _____
The Business Backer, LLC

3.92 **John Small**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.25**
☐ Schedule G _____
Elisha Properties, LLC

3.93 **John Small**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.26**
☐ Schedule G _____
First Nat'l Bank of Brookfield

3.94 **John Small**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.37**
☐ Schedule G _____
Michael & Yvonne Sperandeo

3.95 **John Small**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.51**
☐ Schedule G _____
SPS Partners, LLC

3.96 **John Small**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.6**
☐ Schedule G _____
American Education Services - AES

3.97 **John Small**

☐ Schedule D, line _____
☒ Schedule E/F, line **4.14**
☐ Schedule G _____
Byline Bank

Fill in this information to identify your case:

Debtor 1 Kristin M. SwigonDebtor 2
(Spouse, if filing)United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOISCase number
(If known)

Check if this is:

☐ An amended filing☐ A supplement showing postpetition chapter 13 income as of the following date:MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Occupation****Employer's name****Employer's address****Debtor 1**☐ Employed☒ Not employed**Debtor 2 or non-filing spouse**☒ Employed☐ Not employedDriverUber

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. \$ <u>0.00</u> | \$ <u>3,000.00</u> |
| 3. Estimate and list monthly overtime pay. | 3. +\$ <u>0.00</u> | +\$ <u>0.00</u> |
| 4. Calculate gross income. Add line 2 + line 3. | 4. \$ <u>0.00</u> | \$ <u>3,000.00</u> |

Debtor 1 **Kristin M. Swigon**

Case number (if known)

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------------------------|
| Copy line 4 here | 4. \$ 0.00 | \$ 3,000.00 |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$ 0.00 | \$ 0.00 |
| 5b. Mandatory contributions for retirement plans | 5b. \$ 0.00 | \$ 0.00 |
| 5c. Voluntary contributions for retirement plans | 5c. \$ 0.00 | \$ 0.00 |
| 5d. Required repayments of retirement fund loans | 5d. \$ 0.00 | \$ 0.00 |
| 5e. Insurance | 5e. \$ 0.00 | \$ 0.00 |
| 5f. Domestic support obligations | 5f. \$ 0.00 | \$ 0.00 |
| 5g. Union dues | 5g. \$ 0.00 | \$ 0.00 |
| 5h. Other deductions. Specify: | 5h.+ \$ 0.00 | \$ 0.00 |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. \$ 0.00 | \$ 0.00 |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. \$ 0.00 | \$ 3,000.00 |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. \$ 0.00 | \$ 0.00 |
| 8b. Interest and dividends | 8b. \$ 0.00 | \$ 0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. \$ 0.00 | \$ 0.00 |
| 8d. Unemployment compensation | 8d. \$ 0.00 | \$ 0.00 |
| 8e. Social Security | 8e. \$ 0.00 | \$ 0.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. \$ 0.00 | \$ 0.00 |
| 8g. Pension or retirement income | 8g. \$ 0.00 | \$ 0.00 |
| 8h. Other monthly income. Specify: anticipated income | 8h.+ \$ 0.00 | \$ 850.00 |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. \$ 0.00 | \$ 850.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ 0.00 + \$ 3,850.00 | = \$ 3,850.00 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: | | |
| | 11. +\$ | 0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies | 12. \$ | 3,850.00 |
| Combined monthly income | | |
| 13. Do you expect an increase or decrease within the year after you file this form? | | |
| <input type="checkbox"/> No. | | |
| <input checked="" type="checkbox"/> Yes. Explain: The debtor's spouse is seeking employment and the "anticipated income" entry represents the income expected from employment. | | |

Fill in this information to identify your case:

Debtor 1 Kristin M. Swigon

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

Son2 yrs☐ No☒ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Kristin M. Swigon**

Case number (if known)

| | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------|-----------------|----|--|----|-----------------|
| 6. Utilities: | | | | | | | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | 200.00 | | | | | | |
| 6b. Water, sewer, garbage collection | 6b. \$ | 110.00 | | | | | | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 355.00 | | | | | | |
| 6d. Other. Specify: _____ | 6d. \$ | 0.00 | | | | | | |
| 7. Food and housekeeping supplies | 7. \$ | 700.00 | | | | | | |
| 8. Childcare and children's education costs | 8. \$ | 0.00 | | | | | | |
| 9. Clothing, laundry, and dry cleaning | 9. \$ | 100.00 | | | | | | |
| 10. Personal care products and services | 10. \$ | 50.00 | | | | | | |
| 11. Medical and dental expenses | 11. \$ | 250.00 | | | | | | |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. \$ | 200.00 | | | | | | |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 25.00 | | | | | | |
| 14. Charitable contributions and religious donations | 14. \$ | 0.00 | | | | | | |
| 15. Insurance. | | | | | | | | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | | | | | | | | |
| 15a. Life insurance | 15a. \$ | 133.00 | | | | | | |
| 15b. Health insurance | 15b. \$ | 575.00 | | | | | | |
| 15c. Vehicle insurance | 15c. \$ | 109.00 | | | | | | |
| 15d. Other insurance. Specify: _____ | 15d. \$ | 0.00 | | | | | | |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. \$ | 0.00 | | | | | | |
| 17. Installment or lease payments: | | | | | | | | |
| 17a. Car payments for Vehicle 1 | 17a. \$ | 562.00 | | | | | | |
| 17b. Car payments for Vehicle 2 | 17b. \$ | 0.00 | | | | | | |
| 17c. Other. Specify: _____ | 17c. \$ | 0.00 | | | | | | |
| 17d. Other. Specify: _____ | 17d. \$ | 0.00 | | | | | | |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. \$ | 0.00 | | | | | | |
| 19. Other payments you make to support others who do not live with you. | \$ | 0.00 | | | | | | |
| Specify: _____ | 19. | | | | | | | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | | | | | | | |
| 20a. Mortgages on other property | 20a. \$ | 0.00 | | | | | | |
| 20b. Real estate taxes | 20b. \$ | 0.00 | | | | | | |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 | | | | | | |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 | | | | | | |
| 20e. Homeowner's association or condominium dues | 20e. \$ | 0.00 | | | | | | |
| 21. Other: Specify: Student loans | 21. +\$ | 475.00 | | | | | | |
| 22. Calculate your monthly expenses | | | | | | | | |
| 22a. Add lines 4 through 21. | <div style="border: 1px solid black; padding: 5px;"> <table border="0"> <tr> <td>\$</td> <td>3,844.00</td> </tr> <tr> <td>\$</td> <td></td> </tr> <tr> <td>\$</td> <td>3,844.00</td> </tr> </table> </div> | | \$ | 3,844.00 | \$ | | \$ | 3,844.00 |
| \$ | | | 3,844.00 | | | | | |
| \$ | | | | | | | | |
| \$ | 3,844.00 | | | | | | | |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | | | | | | | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | | | | | | | | |
| 23. Calculate your monthly net income. | | | | | | | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 3,850.00 | | | | | | |
| 23b. Copy your monthly expenses from line 22c above. | 23b. -\$ | 3,844.00 | | | | | | |
| 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. \$ | 6.00 | | | | | | |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form? | | | | | | | | |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | | | | | | | | |
| <input checked="" type="checkbox"/> No. | | | | | | | | |
| <input type="checkbox"/> Yes. Explain here: | | | | | | | | |

Fill in this information to identify your case:

Debtor 1 Kristin M. Swigon
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number
(if known) _____

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Kristin M. Swigon

Kristin M. Swigon
Signature of Debtor 1

Date April 14, 2017

X _____

Signature of Debtor 2

Date _____

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing
Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- ☐ No
☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

From January 1 of current year until
the date you filed for bankruptcy:

Debtor 1

Sources of income
Check all that apply.

Gross income
(before deductions and
exclusions)

☒ Wages, commissions,
bonuses, tips

☐ Operating a business

\$0.00**Debtor 2**

Sources of income
Check all that apply.

Gross income
(before deductions
and exclusions)

☐ Wages, commissions,
bonuses, tips

☐ Operating a business

\$0.00

Debtor 1 **Kristin M. Swigon**

Case number (if known)

| | Debtor 1 | | Debtor 2 |
|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. |
| For last calendar year: (January 1 to December 31, 2016) | <input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business | \$65,000.00 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business |
| For the calendar year before that: (January 1 to December 31, 2015) | <input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business | \$50,000.00 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business |
| For the calendar year: (January 1 to December 31, 2014) | <input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business | \$18,854.00 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

| Debtor 1 | Debtor 2 |
|---------------------------------------------------------------------|----------------------------------------------------|
| Sources of income Describe below. | Sources of income Describe below. |
| Gross income from each source (before deductions and exclusions) | Gross income (before deductions and exclusions) |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- ☐ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|-----------------------------|------------------|-------------------|----------------------|--------------------------|
|-----------------------------|------------------|-------------------|----------------------|--------------------------|

Debtor 1 **Kristin M. Swigon****7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No☐ Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|----------------------------|------------------|-------------------|----------------------|-------------------------|
|----------------------------|------------------|-------------------|----------------------|-------------------------|

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments to an insider

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
|----------------------------|------------------|-------------------|----------------------|----------------------------------------------------|
|----------------------------|------------------|-------------------|----------------------|----------------------------------------------------|

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No☒ Yes. Fill in the details.

| Case title Case number | Nature of the case | Court or agency | Status of the case |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| Michael M. Sperandeo and Yvonne Y. Sperandeo, Plaintiffs vs. John M. Small, Anthony Swigon and Kristen Swigon 16 M 3007174 | Contract | Circuit Court of Cook County Third Municipal Dist. Civil Div. Richard J. Daley Center 50 W. Washington St. Chicago, IL 60602 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| GRP Capital LLC vs. Anthony Swigon et al. 16 L 572 | | DuPage Circuit Court 505 N/ County Farm Rd. Wheaton, IL 60187 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| SPS Partners, LLC vs. John W. Small, Anthony Swigon & Kristin Swigon 2017 L 000339 | Contract | Circuit Court of Du Page County Eighteen Judicial Circuit 505 N. County Farm Rd Wheaton, IL 60187-0707 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.☐ Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property Explain what happened | Date | Value of the property |
|---------------------------|------------------------------------------------|------|-----------------------|
|---------------------------|------------------------------------------------|------|-----------------------|

Debtor 1 **Kristin M. Swigon**

Case number (if known)

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

| Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
|---------------------------|---------------------------------------|-----------------------|--------|
|---------------------------|---------------------------------------|-----------------------|--------|

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--------------------------------------------------------|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift and Address: | | | |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Dates you contributed | Value |
|----------------------------------------------------------------------|-------------------------------|-----------------------|-------|
| Charity's Name Address (Number, Street, City, State and ZIP Code) | | | |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------|
| | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | | |

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

| Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------|-------------------|
| David P. Lloyd, Ltd. 615B S. LaGrange Rd. La Grange, IL 60525 info@davidlloydllaw.com | \$1,500 attorneys fees; \$335 filing fee; and \$40 credit counseling | 1/26/17 | \$1,875.00 |

Debtor 1 **Kristin M. Swigon**

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Case number (if known)

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- ☐ No
☐ Yes. Fill in the details.

| Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--------------------------------|------------------------------------------------------|-----------------------------------------|----------------------|
|--------------------------------|------------------------------------------------------|-----------------------------------------|----------------------|

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☐ No
☐ Yes. Fill in the details.

| Person Who Received Transfer Address | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|-----------------------------------------|--------------------------------------------------|----------------------------------------------------------------------------|---------------------------|
| Person's relationship to you | | | |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☐ No
☐ Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date Transfer was made |
|---------------|---------------------------------------------------|---------------------------|
|---------------|---------------------------------------------------|---------------------------|

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
☐ Yes. Fill in the details.

| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--------------------------------------------------------------------------------------------|------------------------------------|----------------------------------|---------------------------------------------------------------|-----------------------------------------------|
|--------------------------------------------------------------------------------------------|------------------------------------|----------------------------------|---------------------------------------------------------------|-----------------------------------------------|

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☐ No
☐ Yes. Fill in the details.

| Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------|--------------------------|
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------|--------------------------|

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No
☐ Yes. Fill in the details.

| Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----------------------|--------------------------|
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-----------------------|--------------------------|

Debtor 1 **Kristin M. Swigon**

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Case number (if known)

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

| Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
|--------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------|-------|
|--------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------|-------|

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☒ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☒ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☒ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------|----------------|
|--------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------|----------------|

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------|----------------|
|--------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------|----------------|

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

| Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
|---------------------------|-------------------------------------------------------------------------------|--------------------|--------------------|
|---------------------------|-------------------------------------------------------------------------------|--------------------|--------------------|

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

Debtor 1 **Kristin M. Swigon**

Case number (if known)

☐ No. None of the above applies. Go to Part 12.☒ Yes. Check all that apply above and fill in the details below for each business.

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. |
| Creative Foods, LLC dba Scapa Italian Kitchen 1 Walker Ave., Ste. 201 Clarendon Hills, IL 60514 | Restaurant | Dates business existed EIN: 27-4059395 From-To from 2011 to 2016 |
| Self employed | Consultancy | EIN: From-To 2013-2014 |

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No☐ Yes. Fill in the details below.

| | |
|-----------------------------------------------------------------------------|--------------------|
| Name Address (Number, Street, City, State and ZIP Code) | Date Issued |
|-----------------------------------------------------------------------------|--------------------|

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Kristin M. Swigon

Kristin M. Swigon
Signature of Debtor 1

Signature of Debtor 2

Date **April 14, 2017**

Date

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?☒ No☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Kristin M. Swigon | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | | | |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Creditor's name: | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Description of property securing debt: | | |
| Creditor's name: | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Description of property securing debt: | | |
| Creditor's name: | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Description of property securing debt: | | |
| Creditor's name: | <input type="checkbox"/> Surrender the property. | <input type="checkbox"/> No |

Debtor 1 Kristin M. Swigon Case number (if known) _____

name:

- ☐ Retain the property and redeem it.
☐ Retain the property and enter into a
Reaffirmation Agreement.
☐ Retain the property and [explain]:

☐ Yes

Description of
property
securing debt:

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

| Describe your unexpired personal property leases | Will the lease be assumed? |
|------------------------------------------------------|-------------------------------------------------------------|
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Lessor's name: Description of leased Property: | <input type="checkbox"/> No <input type="checkbox"/> Yes |

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Kristin M. Swigon
Kristin M. Swigon
Signature of Debtor 1

X _____
Signature of Debtor 2

Date April 14, 2017

Date _____

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C.
§ 101(8) as "incurred by an individual
primarily for a personal, family, or
household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan
for family farmers or
fishermen

Chapter 13 - Voluntary repayment plan
for individuals with regular
income

**You should have an attorney review your
decision to file for bankruptcy and the choice of
chapter.**

Chapter 7: Liquidation

| | |
|-------|------------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + | \$15 trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | | |
|---|---------|--------------------|
| | \$1,167 | filing fee |
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | |
|---|-------|--------------------|
| | \$200 | filing fee |
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | | |
|---|-------|--------------------|
| | \$235 | filing fee |
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Kristin M. Swigon**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | | |
|-------------------------------------------------------------|----|-----------------|
| For legal services, I have agreed to accept | \$ | 1,500.00 |
| Prior to the filing of this statement I have received | \$ | 1,500.00 |
| Balance Due | \$ | 0.00 |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

All services required by local Rule.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtor(s) in any adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 14, 2017

Date

/s/ David P. Lloyd

David P. Lloyd

Signature of Attorney

David P. Lloyd, Ltd.

615B S. LaGrange Rd.

La Grange, IL 60525

708-937-1264 Fax: 708-937-1265

info@davidlloydllaw.com

Name of law firm

David P. Lloyd

Attorney at Law

615B S. LaGrange Rd., LaGrange IL 60525

(708) 937-1264 • Fax: 708-937-1265

info@davidlloydllaw.com • www.davidlloydllaw.com

CHAPTER 7 ENGAGEMENT AGREEMENT

OUR CLIENT(S): Kristin Swigon

The United States Bankruptcy Code requires that we give you a written contract that explains clearly and conspicuously the services we will provide to you, the fees and charges for our services, and the terms of payment. We agree that knowing in advance what we will do for you, what we ask that you do, and how we will handle our fees and costs is a good practice. We thank you again for selecting us to represent you.

We have agreed to represent you in filing a Chapter 7 bankruptcy case. We agree to perform legal services for you and charge you for such services based on the time necessary to complete the matters you have asked us to handle. Our legal fees are as follows: We will charge \$ 1,500.00 to handle your Chapter 7 case, including the services noted below. In addition, we will collect and pay, on your account \$ 335.00 for the court filing fee, and \$ 40.00 to a credit counseling agency for their fee. For any other matters, we charge \$400/hour for the time we spend on your case. We may also charge you for expenses we incur in handling your case. Such charges may include, but may not be limited to, the following: (1) court filing fees; (2) the actual cost of photocopies and/or postage for volume mailings; (3) the actual cost of overnight, messenger, or other delivery services; (4) long distance charges; and (5) the actual cost of court reporters and transcripts. We do not charge for routine mailings or faxes.

The services we will provide include our initial interview; any additional meetings we need to have in order to get all the information we need to file your case; preparation of the petition, schedules and other required documents; ordering a credit report, valuations, or copies of documents if necessary; and any correspondence with creditors or others as needed to get the required information. After we file your case, there will be a number of other services we provide. These include corresponding with you about your case; answering your questions; corresponding with creditors as necessary; attending the meeting of creditors with you; corresponding with the Chapter 7 trustee as necessary; researching your financial situation; and advising you regarding any legal issues that arise in your Chapter 7 case.

This agreement does not include representation in courts other than the Bankruptcy Court, including any state court proceeding and the appeal of any matter. If other matters arise in your case that will require additional services, we will make every reasonable attempt to discuss them with you before we perform additional services that will involve additional fees or expenses. However, in emergency situations we may be forced to take additional actions to protect your rights without first conferring with you; in such a case we will notify you as soon as possible of the action we have taken and the charge, if any.

You understand that we will not be able to provide adequate legal representation if you fail to fully cooperate with us, fail to provide us with complete and accurate information, or fail to fulfill your obligations. You

further understand that your failure to provide information, cooperate or fulfill your obligations may result in our having to terminate our relationship with you.

Either party may terminate this agreement with or without cause at any time upon giving written notice to the other party (although the Rules of Professional Conduct may limit my ability to discontinue representing you). The termination of this agreement will not affect your obligation to pay for the legal services we have rendered. We agree, in the event this agreement is terminated, to return to you all files in our possession provided you have paid all outstanding legal fees and expenses.

This agreement contains our full and complete understanding with respect to the subject matter hereof. This agreement supersedes all prior representations and understandings, whether written or oral.

If you agree to all the above terms, please date and sign this Agreement in the space below and return a copy, with payment of the advance. Keep a copy of this agreement for your file.

Accepted and agreed this 26 day of January, 2017:


CLIENT

CLIENT

Accepted and agreed this 26 day of January, 2017:


ATTORNEY

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code.

**United States Bankruptcy Court
Northern District of Illinois**

In re **Kristin M. Swigon**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **69**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **April 14, 2017**

/s/ Kristin M. Swigon

Kristin M. Swigon

Signature of Debtor

A+ Hood Cleaning
554 Anderson Dr., Ste. D
Romeoville, IL 60446

Acura Financial
c/o American Honda Finance
2170 Point Blvd., Ste. 100
Elgin, IL 60123-6632

Advanced Disposal
PO Box 6484
Carol Stream, IL 60197

Alsco Linens
2641 S. Leavitt Street
Chicago, IL 60608

American Education Services - AES
Loan Service Division
P.O. Box 2461
Harrisburg, PA 17105-2461

Amita Health
Adventist Hinsdale Hospital
75 Remittance Dr., Ste. 3250
Chicago, IL 60675

AmTrust North America
59 Maiden Lane, 43rd Floor
New York, NY 10038

Angelo Gelato
1041 Waveland Ave.
Franklin Park, IL 60131

Anthony Swigon

Anthony Swigon

Atnhony Swigon

Automatic Icemakers
3725 N. Talman Ave.
Chicago, IL 60618

Banana Republic Visa/Synchrony
PO Box 960017
Orlando, FL 32896-0017

Bank of America Visa
PO Box 851001
Dallas, TX 75285-1001

BOA Merchnat Services
150 N. College Ave.
Charlotte, NC 28202

Byline Bank
10 N. Martingale Rd., Ste. 160
Schaumburg, IL 60173

Capital One Bank USA, NA - Visa
PO Box 30285
Salt Lake City, UT 84130-0287

Chase Bank Visa
PO Box 94014
Palatine, IL 60094-4014

Chase Ink Visa
PO Box 1423
Charlotte, NC 28201-1423

Comcast
2001 York Rd.
Oak Brook, IL 60523

ComEd
10 S. Dearborn St.
Chicago, IL 60603

Constellation New Energy
c/o Teller, Levit & Silvertrust PC
419 S. LaSalle St., Ste. 701
Chicago, IL 60603

Cosmopolitan Linen
4508 W. 46th St.
Chicago, IL 60632

Creative Foods LLC
dba Scapa Italian Kitchen

Creative Foods LLC
d/b/a Scapa Italian Kitchen

Creative Foods, LLC
dba Scapa Italian Kitchen

Creative Foods, LLC
d/b/a Scapa Italian Kitchen

Creative Foods, LLC
d/b/a Scapa Italian Kitchen

Creative Foods, LLC

Deluxe
PO BOX 742572
Cincinnati, OH 45274-2572

EcoLab
370 N. Wabasha St.
Saint Paul, MN 55102-2233

Edward Don
c/o Lichtman Eisen Partners, Ltd.
222 N. LaSalle St., Ste. 300
Chicago, IL 60601

Elisha Properties, LLC
10151 Corporate Sq. Dr., Ste. 100
Saint Louis, MO 63132

First Nat'l Bank of Brookfield
c/o Robert Dawidiuk, Collins Law
1770 N. Park St., Ste. 200
Naperville, IL 60563

Fortune Fish & Gourmet Foods
1068 Thorndale Ave.
Bensenville, IL 60106

Get Fresh Produce
c/o Richard T. Avis & Assoc., LLC
PO Box 31579
Chicago, IL 60631

Gordon Food Service
NACM Comm Claims Div.
PO Box 547800
Orlando, FL 32854-7800

Groupon
600 W. Chicago Ave.
Chicago, IL 60654

IDES
2444 W. Lawrence Ave.
Chicago, IL 60625

Illinois Casualty Company
PO Box 5018
Rock Island, IL 61204

Illinois Emergency Medicine
Specialists, LLC.
PO Box 71402
Chicago, IL 60694

Internal Revenue Service
Centralized Insolvency Operations
P.O. Box 7346
Philadelphia, PA 19101-7346

John Small

Macy's Amex
PO Box 9001108
Louisville, KY 40290-1108

Maestranzi Brothers Knife Co.
4715 N. Ronald St.
Harwood Heights, IL 60706

Michael & Yvonne Sperandeo
c/o William Shapiro, Attorney
452 N. Carlisle Ct.
Round Lake, IL 60073

Nicor Gas
PO Box 5407
Carol Stream, IL 60197

Nicor Gas
PO Box 2020
Aurora, IL 60507-2020

Nordstrom Visa
PO Box 79137
Phoenix, AZ 85062-9137

Northwest Meat Company
440 N. Morgan Street
Chicago, IL 60642

NuCo2
PO Box 9011
Stuart, FL 34995

Open Table
954 W. Washington Blvd., Ste. 320
Chicago, IL 60607

Orkin Pest Control
603 E. Diehl Rd.
IL 60569

Republic Services #551
PO Box 9001154
Louisville, KY 40290-1154

Ria Financial Services
400 S. Broadway
Los Angeles, CA 90013

Roins RFD Produce
2300 W. Lake Street
Chicago, IL 60612

Ronald W. Goers, DDS, PC
6700 Route 83
Darien, IL 60561

SaveOn
100 W. Maple
Troy, MI 48084

Smithereen Pest Management
7400 N. Melvina
Niles, IL 60714

SPS Partners, LLC
c/o William T. Dwyer, Jr., Attorney
10 S. LaSalle Street., Ste. 3700
Chicago, IL 60603

Target Red Card
PO Box 660170
Dallas, TX 75266-0170

The Business Backer, LLC
c/o Scott Liberman, One Dayton Centr
One South Main St., Ste. 1700
Dayton, OH 45402

Tri-Mark Marlin
c/o Credit Recovery Services
212 W. St. Charles Rd.
Villa Park, IL 60181

Turano Baking Co
c/o Attorney Richard T. Avis
PO Box 31579
Hinsdale, IL 60521-3930

Village of Clarendon Hills
1 N. Prospect
Clarendon Hills, IL 60514

West Suburban Currency Exchanges
2140 S. Wolf Rd., Ste. A
Des Plaines, IL 60018

Westmont Currency Exchange
6230 S. Cass Ave.
IL 60590

Willowbrook Currency Exchange
217 S. Kingery Hwy
Willowbrook, IL 60527

Wirtz Beverage
c/o Mark E. Abrams, Abrams & Abrams
180 W. Washington St., Ste. 910
Chicago, IL 60602